

ACVR Diagnostic Imaging Residency Training Program Application

This application is required for institutions desiring ACVR accreditation of a new residency training program and for institutions requesting re-accreditation of an existing program.

Before beginning the application process, all applicants should review the most recent version of the <u>ACVR Residency Program Essential Training Standards and Requirements</u>(RPE) document (accessed from the Essentials Homepage) in detail. Use the RPE as a reference when completing the application form, as the contents you provide herein will be evaluated by the Residency Standards and Evaluation Committee (RSEC) against the published RPE standards. This application form follows the headings of the RPE. All terms used in this application have same definitions as those in the RPE, and no information provided in the application form itself will supersede that published in the RPE.

During the application review process, the Chair or Assistant Chair of the RSEC may contact the applicant for additional information or clarification.

*Note: If you wish to save your submission and complete it later, click the save button located at the bottom of the pages. You will be emailed a link to complete your form at a later date.

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Program Summary

The Residency Director of the program is expected to be the primary applicant and contact person for this application. The Residency Director must be located at the primary training institution.

Institution Name Sage Veterinary Imaging

Residency Program Director Name Jaime Sage

Residency Program Director Email jaime@sageveterinary.com

Program Type

What type of residency program is being requested?

Traditional Residency Program

If approved, what is the proposed start date of this residency program?

Monday, July 1, 2024

Objectives

Succinctly state the objectives of the training program.

Provide clinical training in veterinary diagnostic radiology, ultrasound, computed tomography, magnetic resonance imaging, nuclear medicine, and special procedures to prepare the resident to successfully complete the American College of Veterinary Radiology board examination, participate in clinical research, and to embark on a successful and enjoyable career as a veterinary radiologist.

Training Period

What is the total length of the training program?

What is the anticipated length of supervised clinical training a resident will experience during this program?

program?

Will the resident(s) in this program be eligible to take the ACVR Preliminary Exam in September of their third year?

Yes

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What are the responsibilities of the resident(s) during non-clinical portions of the program? Study time for boards, research, content creation for teaching, and PTO

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Direction and Supervision

When calculating time commitment in this section, you may consider a 100% (full time) duty schedule to consist of 48 weeks per year with 8 hours per day or 40 hours per week.

Residency Director

Please review the Residency Director requirements and responsibilities in the <u>ACVR Residency Program Essential Training Standards and Requirements</u> (RPE) document. Note that the Residency Director will be required to provide at least 24 weeks of clinical duty per year in primary support of residents in this program and to meet all other qualifications of a Supervising Diplomate.

Is the applicant Residency Director for this program prepared to meet these requirements? Yes

What percentage of the Residency Director's time is committed to clinical service at the primary training institution?

70

How many weeks per year will the Residency Director be on clinical service and teaching residents at the primary training institution?

39

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Additional Training Diplomates

Please review the definitions and responsibilities of <u>Supervising Diplomate</u> and <u>Supporting Diplomate</u> in the RPE document. Note that Supervising Diplomates will be required to provide at least 10 weeks of clinical duty in primary support of residents in this program, and are expected to participate in all facets of residency training. Supporting Diplomates aid in residency training, but provide support that is limited, as by modality (e.g. only works in ultrasound), time commitment (e.g. clinical duty < 10 weeks per year), or other constraints that prevent them from qualifying as a Supervising Diplomate.

Provide a copy of affiliation agreements with any diplomates that are located at an external institution (see Affiliation Agreement item at the end of this section).

Excluding the Residency Director, please list all training diplomates who will act as Supervising Diplomates of this residency program. Indicate the approximate number of hours per year each supervisor will be scheduled on clinical duty with primary support of residents and, if applicable, any specific areas of instructional responsibility (e.g. trains mostly in small animal, trains mostly in MRI, etc). If a 'Supervising Diplomate' position will be comprised of multiple radiologists, please list the cohort as a single entity or institution for this question (e.g. "teleradiologists" or private institution name)

Name: Melanie Anderson

Hours/Year: 640

Specific Areas and/or Limitations of Instructional Responsibility: all areas

Institution: Sage Veterinary Imaging

Please list all training diplomates who will act as Supporting Diplomates of this residency program. Indicate how many hours per year each Supporting Diplomate will be scheduled on clinical duty with primary support of residents and any specific areas of instructional responsibility and/or limitations in the scope of this support (e.g. only trains residents in ultrasound, does not participate in large animal training, does not finalize imaging reports, etc).

Name: Bob Kramer

Hours/Year: 600

Specific Areas of Instructional Responsibility: Radiographs and CT

Institution: Sage Veterinary Imaging

In addition to ACVR/ECVDI Diplomates, the program must arrange for the resident(s) to have direct access to specialists in other areas. Please identify one member in each of the specialty colleges listed below that has agreed to support this program through clinical activity that allows regular interactions between the specialist and the diagnostic imaging residents (e.g. discussion of diagnostic work up, imaging findings, or patient outcomes, and/or participation in interdisciplinary rounds, etc). Indicate whether the specialist is located on-site at the primary institution at an external institution. Provide a copy of affiliation agreements with any non-ACVR/ECVDI diplomates that are located at an external institution (see Affiliation Agreement section at the end of this application).

Upon completion of this application, the below individuals will receive an email requesting acknowledgement of their support of your residency program.

ACVIM Member Name

David Bruyette

ACVIM Member Institution

Veterinary Diagnostic Investigation and Consultation

ACVIM Member Email

Davebruyette@aol.com

ACVS Member Name

Jeff Weinstein

ACVS Member Institution

Capital Area Veterinary Specialists 3 ACVS Member Email jeffrey.weinstein@vca.com

ACVP Member Name Kellie Whipple

ACVP Member Institution Idexx Laboratories

ACVP Member Email kellie-whipple@idexx.com

Upload any affiliation agreement(s) with Supervising Diplomates, Supporting Diplomates, or Diplomates in other specialties that are located at external institutions. (see Affiliation Agreement section at the end of this application.) Refer to the RPE document for an explanation of what information should be included in such agreements.



Upload any affiliation agreement(s) with Supervising Diplomates, Supporting Diplomates, or Diplomates in other specialties that are located at external institutions. (see Affiliation Agreement section at the end of this application.) Refer to the RPE document for an explanation of what information should be included in such agreements.



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Resident: Supervising Diplomate Ratio

The number of residents in the program cannot exceed twice the number of Supervising Diplomates **on-site**. Remote Supervising Diplomates will not count when calculating the maximum residents allowed in a given program.

What is the maximum number of imaging interns you will have enrolled in this training program at any given time?

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Facilities

Review the Facility Requirements listed in the RPE document. Note also that residents should have opportunities to be involved with image acquisition and protocol set-up.

Does this residency training program provide on-site access to modern equipment for the following modalities?

Digital or Computed Radiography	Yes
Fluoroscopy	Yes
Ultrasound with Doppler Capability	Yes
MRI	Yes
Fan-beam CT	Yes
Nuclear scintigraphy	Yes

Briefly describe how this program meets the facility requirements, including the specific type of CT and MRI units available. Explain how your program will train residents in modalities for which equipment is not located on site, providing affiliation agreements if applicable. (see Affiliation Agreement item at the end of this section)

3T MRI Philips Achieva on-site: resident involving in patient positioning, protocol development, real-time sequence direction, reading the case, client and clinician communication

128-slice Philips Incisive on-site CT: resident will fully operate machine, patient positioning, protocol development, reading the case, client and clinician communication

Samsung RS-80: Ultrasound and echocardiograms, resident to do all aspect of imaging, case reporting, communication

Nuclear scintigraphy: scintigraphy and I-131 program

Idexx radiology DR machine: ordering rads, positioning, and reporting on images

Philips Pulsera Fluoroscophy

Please describe how residents will gain experience in image acquisition and protocol set-up for each of these modalities (excluding nuclear medicine).

See above

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Clinical Resources and Training Content

Review the clinical resource and training content requirements listed in the RPE document

What is the average annual caseload at the primary institution over the past 3 years? This number will include all patient visits whether or not they contribute to the annual imaging caseload.

What is the average annual imaging caseload at the primary institution over the past 3 years? Each body region imaged for a given patient (e.g. thorax, abdomen, spine, etc) will count as a single study.

8000

What is the average annual imaging caseload at the primary institution over the past 3 years in the following categories?

Small animal radiology 3468

Large animal radiology 0

Abdominal ultrasound 3000

Non-abdominal ultrasound 480

Computed tomography 1200

Magnetic Resonance Imaging 2800

Nuclear scintigraphy 240

Indicate the approximate species breakdown of the imaging caseload at the primary institution in the following categories:

Small animals (canine, feline): 99

Large animals (equine, bovine, porcine, etc.): 0

Avian, Exotic, and Wildlife animals: 1

Which of the following types of imaging cases will the resident(s) have direct, on-site exposure to at the primary institution during the residency program?

Echocardiography Yes

Large animal ultrasound No

Nonabdominal small animal Yes ultrasound (i.e. cervical, musculoskeletal)

Food/fiber animal imaging No

Exotics imaging Yes

Teleradiology/Referral imaging Yes

Explain how the resident(s) in this program will gain experience in any of the above types of imaging cases that are NOT available at the primary institution. Provide affiliation agreements, if applicable. (see Affiliation Agreement item at the end of this section).

Affiliation with TAMU for regularly scheduled large animal rounds and the option of on-site training.

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What percentage of the total imaging caseload at the primary institution results in a written imaging report being generated by either the residents or the training radiologist diplomates in this program?

If < 99%, please provide a brief explanation and account for this when calculating the number of cases that each resident will interpret.

All imaging procedures on-site are written by residents and approved by diplomates with the exception of training cases written by DI interns. Additional radiologists read teleradiology cases not reviewed by residents/interns

What percentage of the preliminary reports generated from the imaging caseload are initially produced by the resident(s) in this program?

70

Does this institution concurrently support the training of diagnostic imaging interns?

Yes

If yes, indicate the maximum number of imaging interns the institution will train concurrently, what percentage of the preliminary reports generated from the imaging caseload will be initially produced by the intern(s), and how this affects the resident imaging report caseload.

3, only 10% maximum (increased from zero first 3 months to more as the interns become more skilled and efficient) but residents do not lose out on cases, interns will submit their report in a separate document to review

What percentage of residentgenerated reports are reviewed by training diplomates prior to finalization of the report? 95

What is the average turnaround time for resident-generated preliminary reports to be finalized by training diplomates?

within 24-hours

What percentage of all imaging reports (resident and diplomate generated) is finalized and available to requesting clinicians within 48 hours after the exam is submitted for radiologist consult?

100

Please describe how after-hours/weekend/holidaycases are handled at the primary institution. How does this affectresident-reported imaging caseload?

Yes, they do preliminary reads and calls on weekend and STAT afterhour cases with diplomate back up

For each category below, calculate the approximate number of cases that a single resident will <u>interpret at the primary institution with radiologist feedback</u> during the course of the entire residency program. These

numbers should be calculated using the annual imaging caseload adjusted to include only those with written reports generated by the residents. In general, this number should then be divided by the total number of residents in a program during a given year.

If external rotations for the resident(s) are employed to increase the resident caseload in any given category, please be sure to upload affiliate agreements that include the expected number of reports that residents can expect to generate (with radiologist feedback) for cases in those categories.

Small animal radiology	4200
Large animal radiology	0
Abdominal ultrasound	2800
Non-abdominal ultrasound	700
Computed tomography	450
Magnetic resonance Imaging	450
Nuclear scintigraphy	400
How many ultrasound exams will a single resident perform with radiologist supervision and feedback during the course of the entire program? Scans for which the resident writes a report but does not acquire images are excluded.	2300
Do residents in this program have ample hands-on training and practice opportunities to become proficient in the performance of ultrasound guided fine needle aspirates and biopsies?	Yes

Please indicate whether this training program includes formal courses in any of the following topics:

Physics of Diagnostic Imaging	No
Radiobiology	Yes
Nuclear Medicine	Yes
Ultrasonography	Yes
Computed Tomography	Yes
Magnetic Resonance Imaging	Yes
Other	No

Briefly describe the formal courses that are available for the resident(s) in this program by indicating the institution, course title, course number, and credit hours as well as any other relevant information. For any topics for which formal course work is not provided for the resident(s), please explain how educational objectives in these topics will be met.

MRI fellowship courses, RACE approved, 9 programs, 72 hours CE Radiobiology: Synovetin OA course, nuc med study content

CT: Philips training MRI: Philips training

US: Wet lab training with RACE approval, 20 hours CE

Do residents have access to a majority of the written pathology reports that are generated from patients included in this imaging caseload?



Will the resident(s) in this program attain an advanced degree (MS, PhD) at the conclusion of the program?



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Research Environment

Review the Research Requirements listed in the RPE document.

Over the last five years, what is the average number of peer reviewed publications on which the training diplomates (Supervising and Supporting diplomates) of this program are included as authors? (total number of publications in last 5 years among all training diplomates divided by the number of training diplomates)

2

How many peer-reviewed publications 1 are expected of a resident completing the program?

If this is an established program, what 0 percentage of residents have made formal research presentations at the annual ACVR or equivalent national meeting?

Briefly describe if/how residents are encouraged to engage in investigative work and what mechanisms are in place for training diplomates to support this work.

Translational clinical research performed at location in SLC, Utah in agreement with projects with the University of Utah and GLP labs, including opportunities for publication

Educational Environment

Review the Educational Environment expectations listed in the RPE document.

Please list and enumerate the formal presentations that are expected of each resident during the course of their training. In general, didactic lectures, departmental seminars, scientific presentations, Continuing Education presentations, and similar are considered "formal". Informal topic rounds, journal club, small group teaching (like student rounds), student labs, and similar events should not be included.

CE presentation to VMA: 1

US Wet Labs Lectures and didactics: 2 per yr (12 hours)

Scientific presentations: 1

Briefly describe the type and extent of teaching opportunities that are provided to the resident throughout the training program.

Resident teaches DI interns on the clinic floor, educates referring GPs, reviews imaging cases with referring specialist, and regular DI intern lectures with presentation/content creation

Briefly describe the nature and scope of the teaching file available to the resident(s) in this program and how it is maintained/updated.

Online residency program created and maintained with structured monthly readings, quizzes, Mock exams and additional content

How many Known Case Conferences 12 are conducted annually?

Describe the nature and frequency of resident rounds ("other educational events") planned for this program. You may upload an example schedule with the general program schedule that is requested at the end of this application.

Every week: Journal Club 1 day, case rounds 3 day, 1 day chief resident gives lecture to other resident and interns

Describe how the resident(s) in this program will attain direct and consistent medical library access and/or how they will access research tools and medical literature including the suggested references listed in the ACVR Preliminary Examination study guide.

Residency Mendeley account with cataloged articles Access to library at TAMU through affiliation

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Evaluation and Protection of Residents

For existing programs, list the names, email contact information, and start/end dates of your current residents.

Karin Prater, karin@sageveterinary.com, 7/1/2021-6/29/2024 Heather Ellis, heather.ellis@sageveterinary.com, 01/01/2024-12/31/2026

Did all of your current residents adequately complete the last 6 months of training?



List the current members of the resident review committee.

Jaime Sage Melanie Anderson Describe the internal mechanisms in place at your institution to protect the resident(s) if personal or organizational conflicts arise. Include the management hierarchy for residents and procedures by which residents would report workplace misconduct.

Daily communication with residency director, opportunity to reach out directly to HR or Jason Lane, Senior Manager of Operations

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Appendix

Please provide the following information regarding preliminary and certifying board exam pass rates for residents in your program over the past five years.

Preliminary Board Exam Pass Rate

Number Of Prelim Board Eligible Residents: 0		
Number of Residents That Took Prelim Exam: 0		
Number of Residents That Passed On 1st Attempt: 0		
Number of Residents That Passed After Multiple Attempts: 0		
Number of Residents That Have Not Passed: 0		
Number Of Prelim Board Eligible Residents: 0		
Number of Residents That Took Prelim Exam: 0		
Number of Residents That Passed On 1st Attempt: 0		
Number of Residents That Passed After Multiple Attempts: 0		
Number of Residents That Have Not Passed: 0		

2018	Number Of Prelim Board Eligible Residents: 0
	Number of Residents That Took Prelim Exam: 0
	Number of Residents That Passed On 1st Attempt: 0
	Number of Residents That Passed After Multiple Attempts: 0
	Number of Residents That Have Not Passed: 0
2017	Number Of Prelim Board Eligible Residents: 0
	Number of Residents That Took Prelim Exam: 0
	Number of Residents That Passed On 1st Attempt: 0
	Number of Residents That Passed After Multiple Attempts: 0
	Number of Residents That Have Not Passed: 0
2016	Number Of Prelim Board Eligible Residents: 0
	Number of Residents That Took Prelim Exam: 0
	Number of Residents That Passed On 1st Attempt: 0
	Number of Residents That Passed After Multiple Attempts: 0
	Number of Residents That Have Not Passed: 0

Certifying Board Exam Pass Rate

2020	Number of Certifying Board Eligible Residents: 0
	Number of Residents That Took Certifying Exam: 0
	Number of Residents That Passed On 1st Attempt: 0
	Number of Residents That Passed After Multiple Attempts: 0
	Number of Residents That Have Not Passed: 0
2019	Number of Certifying Board Eligible Residents: 0
	Number of Residents That Took Certifying Exam: 0
	Number of Residents That Passed On 1st Attempt: 0
	Number of Residents That Passed After Multiple Attempts: 0
	Number of Residents That Have Not Passed: 0
2018	Number of Certifying Board Eligible Residents: 0
	Number of Residents That Took Certifying Exam: 0
	Number of Residents That Passed On 1st Attempt: 0
	Number of Residents That Passed After Multiple Attempts: 0

Number of Residents That Have Not Passed: 0

2017	Number of Certifying Board Eligible Residents: 0
	Number of Residents That Took Certifying Exam: 0
	Number of Residents That Passed On 1st Attempt: 0
	Number of Residents That Passed After Multiple Attempts: 0
	Number of Residents That Have Not Passed: 0
2016	Number of Certifying Board Eligible Residents: 0
	Number of Residents That Took Certifying Exam: 0
	Number of Residents That Passed On 1st Attempt: 0
	Number of Decidents That Deced After Multiple
	Number of Residents That Passed After Multiple

Program Schedule

Attempts: 0

Upload a schedule for your residents that outlines their clinical and non-clinical work over the course of the residency program. This may be a master schedule or duty roster for your entire radiology section, if desired. If available, an example weekly or monthly rounds schedule can also be included.

Program Schedule



Radiology Resident Schedule.pdf

Number of Residents That Have Not Passed: 0

Affiliation Agreements

Upload digital copies of any affiliation agreements that have not been included elsewhere in this document. Refer to the RPE document for an explanation of what information should be included in such agreements.